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Total Pages (Including cover): 35

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London		
Los Angeles	Company: USPTO, Art Unit 2877	Phone No: (571) 272-2419
New York		
Northern Virginia		
Orange County	Re: In re Patent Application of	
Palo Alto	Inventor: Gould et al.	
Sacramento	Appln. No.: 10/039,769	
San Diego	Filing Date: December 31, 2001	
San Diego-North County	Title: SCANNING SPECTROPHOTOMETER FOR HIGH	
San Francisco	THROUGHPUT FLUORESCENCE DETECTION AND	
Silicon Valley	FLUORESCENCE POLARIZATION	
Stamford	From: Anthony G. Smyth	Phone No: 858.509.4007
Sydney	User No: 15636	C/M No: 016417-0272123
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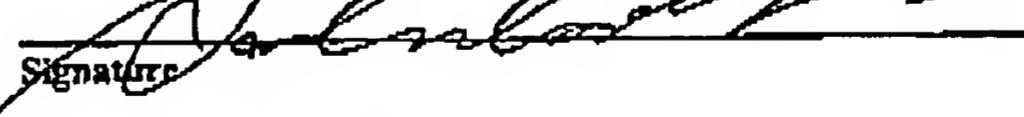
Amendment in response to outstanding Office Action mailed December 29, 2005, 2 Terminal Disclaimers (each in duplicate), RCE, Extension of Time Request, and Fee Transmittal for the above-identified application.

(Current Due Date: April 29, 2006)

CERTIFICATION UNDER 37 C.F.R. §§ 1.8 and/or 1.10*

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PTO/SB/21 (02-04)

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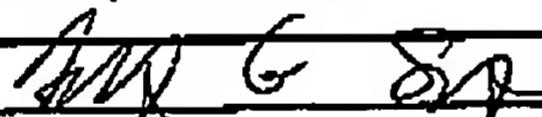
Application Number	10/039,789
Filing Date	12/31/2001
First Named Inventor	Gene Gould
Art Unit	2877
Examiner Name	LEE, Wha S.
Attorney Docket Number	016417-0272123

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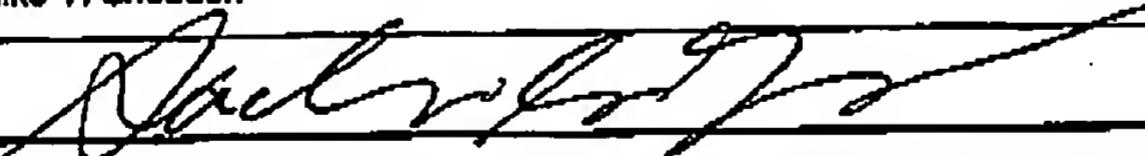
ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer (2) <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks RCE; Fax Cover Sheet		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Anthony G. Smyth, Reg. No. 55,636 Pillsbury Winthrop Shaw Pittman LLP
Signature	
Date	April 21, 2006

CERTIFICATE OF TRANSMISSION/MAILING

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Date	April 21, 2006

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PTO/SB/17 (12-04)

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4816).

FEE TRANSMITTAL for FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 785)

Complete if Known

Application Number	10/039,769
Filing Date	December 31, 2001
First Named Inventor	GENE GOULD
Examiner Name	LEE, Hwa S.
Art Unit	2877
Attorney Docket No.	016417-0272123

METHOD OF PAYMENT (check all that apply)

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Deposit Account Deposit Account Number: 033975 Deposit Account Name: PILLSBURY WINTHROP SHAW PITTMAN LLP

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Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fee Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	
Utility	300	150.00	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>
50	25
200	100
380	180

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
65	28 over HP = 4	X 0.00	= 0.00			
	HP = highest number of total claims paid for, if greater than 20					
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
8	28 or HP = 2	X 100.00	= 200.00			
	HP = highest number of independent claims paid for, if greater than 3					

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)

for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/50 =	(round up to a whole number)	X 125.00	=

4. OTHER FEE(S)

Non-English Specification, 130 fee (no small entity discount)	1 Month Extension of Time (Fee Code: 2251)	\$60;
	2 Terminal Disclaimers (Fee Code: 2814)	\$130;
Other:	RCE (Fee Code: 2801)	\$395

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	55636	Telephone	858509-4007
Name (Print/Type)	Anthony Smyth			Date	April 21, 2006

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PTO/SB/17 (12-04)

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL for FY 2005

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 785)

Complete if Known

Application Number	10/039,769
Filing Date	December 31, 2001
First Named Inventor	GENE GOULD
Examiner Name	LEE, Hwa S.
Art Unit	2877
Attorney Docket No.	016417-0272123

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<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 033975					Deposit Account Name: PITTMAN LLP
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
<input checked="" type="checkbox"/> Charge fee(s) indicated below			<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fees(s) under 37 CFR 1.16 and 1.17			<input checked="" type="checkbox"/> Credit any overpayments		

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1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150.00	500	250	200	100	
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Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent
 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent
 Multiple dependent claims

Fee (\$)	Fee (\$)
60	25
200	100
360	180

$$\begin{array}{l} \text{Total Claims - 60 = } \frac{\text{Extra Claims}}{65 - 60 \text{ or HP = 4}} \times \frac{\text{Fee ($)}}{100.00} = \frac{\text{Fee Paid ($)}}{0.00} \\ \text{HP = highest number of total claims paid for, if greater than 20} \\ \text{Indep. Claims - 6 = } \frac{\text{Extra Claims}}{8 - 6 \text{ or HP = 2}} \times \frac{\text{Fee ($)}}{100.00} = \frac{\text{Fee Paid ($)}}{200.00} \\ \text{HP = highest number of independent claims paid for, if greater than 3} \end{array}$$

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)
 for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(a).

$$\begin{array}{l} \text{Total Sheets - 100 = } \frac{\text{Extra Sheets}}{150} \times \frac{\text{Number of each additional 50 or fraction thereof}}{(round up to a whole number)} \times \frac{\text{Fee ($)}}{125.00} = \frac{\text{Fee Paid ($)}}{} \end{array}$$

4. OTHER FEE(S)

Non-English Specification, 130 fee (no small entity discount) 1 Month Extension of Time (Fee Code: 2251) \$60;
 2 Terminal Disclaimers (Fee Code: 2814) \$130;
 Other: RT FEE (Fee Code: 2801) \$395

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	55636	Telephone	858509.4007
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